

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Citizens United Political Victory Fund

ADDRESS (number and street)

1006 Pennsylvania Ave. SE

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00295527

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

02

01

2008

through

02

29

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kevin Allen

Signature of Treasurer

Electronically Filed by Kevin Allen

Date

04

18

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Citizens United Political Victory Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	9	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		854601.56
(b) Cash on Hand at Beginning of Reporting Period .....	680922.70	
(c) Total Receipts (from Line 19) .....	58902.00	93846.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	739824.70	948447.56
7. Total Disbursements (from Line 31) .....	12213.53	220836.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	727611.17	727611.17
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Citizens United Political Victory Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	9	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	8522.00	8522.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	50380.00	85324.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	58902.00	93846.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	58902.00	93846.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	58902.00	93846.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	58902.00	93846.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1018.53	34481.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	1018.53	34481.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditure (use Schedule E) .....	0.00	100000.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	45.00	205.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	45.00	205.00
29. Other Disbursements.....	1150.00	76150.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12213.53	220836.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12213.53	220836.39

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	58902.00	93846.00
34. Total Contribution Refunds (from Line 28(d)) .....	45.00	205.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	58857.00	93641.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1018.53	34481.39
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1018.53	34481.39

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Mr. Bill Albee

Mailing Address Po Box 591

City

Copperopolis

State

CA

Zip Code

95228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	9	/	2	0	0	8

Transaction ID: A2008-468168

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Bill Albee

Mailing Address Po Box 591

City

Copperopolis

State

CA

Zip Code

95228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	9	/	2	0	0	8

Transaction ID: A2008-468236

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Gary Brown

Mailing Address P.O. Box 311

City

Westchester

State

OH

Zip Code

45071

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	4	/	2	0	0	8

Transaction ID: A2008-464806

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

720.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Ms. Elizabeth Bullen

Mailing Address 10150 Otter Tail Ct

City

Colorado Springs

State

CO

Zip Code

80920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 4 / 2 0 0 8

Transaction ID: A2008-464805

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Ann Carrell

Mailing Address 2531 Top Hill Rd

City

Louisville

State

KY

Zip Code

40206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-468179

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Ann Carrell

Mailing Address 2531 Top Hill Rd

City

Louisville

State

KY

Zip Code

40206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-468242

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional) .....

870.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Mr. William N Collings

Mailing Address 335 N Booth St

City

Dubuque

State

IA

Zip Code

52001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1535.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 8 / 2 0 0 8

Transaction ID: A2008-466487

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William N Collings

Mailing Address 335 N Booth St

City

Dubuque

State

IA

Zip Code

52001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1535.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 8 / 2 0 0 8

Transaction ID: A2008-466265

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. William N Collings

Mailing Address 335 N Booth St

City

Dubuque

State

IA

Zip Code

52001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1535.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 8 / 2 0 0 8

Transaction ID: A2008-466359

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

1535.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Joan Ellinwood

Mailing Address Po Box 1445

City

Tubac

State

AZ

Zip Code

85646

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Requested

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 7 / 2 0 0 8

Transaction ID: A2008-467818

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Barbara Hayes

Mailing Address 4205 Lakeside Dr

City

Dallas

State

TX

Zip Code

75219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-468215

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Barbara Hayes

Mailing Address 4205 Lakeside Dr

City

Dallas

State

TX

Zip Code

75219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-468253

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1015.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Mr. Sherrill Isaacs

Mailing Address 6137 S Louisville Ave

City

Tulsa

State

OK

Zip Code

74136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	0	8

Transaction ID: A2008-467437

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Sherrill Isaacs

Mailing Address 6137 S Louisville Ave

City

Tulsa

State

OK

Zip Code

74136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	0	8

Transaction ID: A2008-467324

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Steve W Keinath

Mailing Address 215 W 24th St

City

Rifle

State

CO

Zip Code

81650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SK Holdings

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	3	/	2	0	0	8

Transaction ID: A2008-465470

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) .....

240.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Mr. Steve W Keinath

Mailing Address 215 W 24th St

City

Rifle

State

CO

Zip Code

81650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SK Holdings

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	3	/	2	0	0	8

Transaction ID: A2008-465981

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Anne Munz

Mailing Address 23600 Sw 162nd Ave

City

Homestead

State

FL

Zip Code

33031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	0	8

Transaction ID: A2008-467418

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Anne Munz

Mailing Address 23600 Sw 162nd Ave

City

Homestead

State

FL

Zip Code

33031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	0	8

Transaction ID: A2008-467313

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) .....

720.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Sumner Pingree

Mailing Address 28 Eagle Island Pl

City

Sheldon

State

SC

Zip Code

29941

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 7 / 2 0 0 8

Transaction ID: A2008-467846

Amount of Each Receipt this Period

350.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Barbaralee V Reese

Mailing Address 248 Crossroad School Rd

City

Newville

State

PA

Zip Code

17241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 5 / 2 0 0 8

Transaction ID: A2008-467220

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Barbaralee V Reese

Mailing Address 248 Crossroad School Rd

City

Newville

State

PA

Zip Code

17241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 6 / 2 0 0 8

Transaction ID: A2008-467550

Amount of Each Receipt this Period

2.00

**SUBTOTAL** of Receipts This Page (optional) .....

852.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Joyce S Schuchart

Mailing Address 1229 Primavera Dr N

City

Palm Springs

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 5 / 2 0 0 8

Transaction ID: A2008-467320

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Joyce S Schuchart

Mailing Address 1229 Primavera Dr N

City

Palm Springs

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 5 / 2 0 0 8

Transaction ID: A2008-467466

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Charles Shetrom

Mailing Address Po Box 8

City

Huntingdon

State

PA

Zip Code

16652

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-468173

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

240.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Mr. Charles Shetrom

Mailing Address Po Box 8

City

Huntingdon

State

PA

Zip Code

16652

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-468255

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs. Margaret Short

Mailing Address 24919 Bliss Canyon Ct

City

Katy

State

TX

Zip Code

77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 8 / 2 0 0 8

Transaction ID: A2008-466474

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Margaret Short

Mailing Address 24919 Bliss Canyon Ct

City

Katy

State

TX

Zip Code

77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 8 / 2 0 0 8

Transaction ID: A2008-466350

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

420.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

David Simms

Mailing Address 971 Coronado Blvd

City

Sacramento

State

CA

Zip Code

95864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	0	8

Transaction ID: A2008-467459

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John Stoudemire

Mailing Address 4763 Godwin Ave

City

Jacksonville

State

FL

Zip Code

32210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	0	8

Transaction ID: A2008-467461

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John Stoudemire

Mailing Address 4763 Godwin Ave

City

Jacksonville

State

FL

Zip Code

32210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	0	8

Transaction ID: A2008-467317

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) .....

470.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Charles Virgin

Mailing Address 2700 Sw 3rd Ave

City

Miami

State

FL

Zip Code

33129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Requested

Occupation  
Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 1 / 2 0 0 8

Transaction ID: A2008-466920

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Gina Whitney

Mailing Address 14 Jeanette Dr

City

Massapequa

State

NY

Zip Code

11758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-468194

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Gina Whitney

Mailing Address 14 Jeanette Dr

City

Massapequa

State

NY

Zip Code

11758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-468250

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

1220.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Ms. Lynn Wilkins

Mailing Address 56 Forsythe Sq

City

State

Zip Code

Mobile

AL

36608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 9 / 2 0 0 8

Transaction ID: A2008-466494

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Lynn Wilkins

Mailing Address 56 Forsythe Sq

City

State

Zip Code

Mobile

AL

36608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 9 / 2 0 0 8

Transaction ID: A2008-466652

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

220.00

**TOTAL** This Period (last page this line number only) .....

8522.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 25118

City  
Tampa

State  
FL

Zip Code  
33622

Purpose of Disbursement  
Merchant Services Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: FL

District:

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B210694

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

60.00

B.

Full Name (Last, First, Middle Initial)

JP Morgan Chase Bank

Mailing Address P.O. Box 260180

City  
Baton Rouge

State  
LA

Zip Code  
70826

Purpose of Disbursement  
Merchant Services Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: LA

District:

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B210696

Date of Disbursement

02 / 04 / 2008

Amount of Each Disbursement this Period

559.36

C.

Full Name (Last, First, Middle Initial)

JP Morgan Chase Bank

Mailing Address P.O. Box 260180

City  
Baton Rouge

State  
LA

Zip Code  
70826

Purpose of Disbursement  
Merchant Services Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: LA

District:

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B210697

Date of Disbursement

02 / 04 / 2008

Amount of Each Disbursement this Period

372.34

**SUBTOTAL** of Disbursements This Page (optional) .....

991.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

JP Morgan Chase Bank

Mailing Address P.O. Box 260180

City  
Baton Rouge

State  
LA

Zip Code  
70826

Purpose of Disbursement  
Merchant Services Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: LA

District:

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B210698

Date of Disbursement

MM / DD / YYYY  
02 / 04 / 2008

Amount of Each Disbursement this Period

26.83

SUBTOTAL of Disbursements This Page (optional) .....

26.83

TOTAL This Period (last page this line number only) .....

1018.53

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)  
Duncan D. Hunter for Congress

Mailing Address P.O. Box 2233

City Alpine State CA Zip Code 91903

Purpose of Disbursement  
Contribution

Candidate Name  
Duncan Hunter

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 52

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

**Transaction ID:** B210701

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Woody Jenkins for Congress

Mailing Address 910 N. Foster Drive

City Baton Rouge State LA Zip Code 70806

Purpose of Disbursement  
Contribution

Candidate Name  
Louis Jenkins

Office Sought: ☒ House  
☐ Senate  
☐ President

State: LA District: 06

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** B210700

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

10000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Citizens United Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

Maryland Republican Assembly

Mailing Address 1328 New Hampshire Drive

City Frederick State MD Zip Code 21702

Purpose of Disbursement  
O-2010 State Party Cmte MD

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B210695

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Citizens United Foundation

Mailing Address 1006 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
O-2008 Non-Profit Organization DC

Candidate Name

012  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Not Applicable

Transaction ID: B210699

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

1150.00

Image# 28931224451

Form/Schedule: **SB21B**

This amendment was filed in order to disclose a different beginning and ending balance and to disclose a different 21(b) Column B total.

Transaction ID:

\*\*\*\*\*